

**TIPTON COUNTY HEALTH DEPARTMENT
1000 SOUTH MAIN STREET
TIPTON, INDIANA 46072
Phone: 765-675-8741
Fax: 765-675-6952**

APPLICATION FOR TEMPORARY FOOD PERMIT
Notify Tipton County Health Department thirty (30) days prior to the event.

Name of Business: _____

Name of Operator: _____

Name of Certified Food Handler: _____

Certification Number: _____ **Expiration Date:** _____

Name of Owner: _____

Address of Owner: _____

Phone Numbers: _____

Name of Event: _____

Location of Event: _____

Date(s) of Event: _____

Times you'll be open during this event: _____

List all items to be offered for consumption: _____

Owner's Signature: _____

If you are a Not-for-Profit Organization, please list your tax-exempt number or we must charge you a fee. Tax-Exempt #: _____

*******Tempo rary Food Permit Fee Schedule*******

One (1) to Three (3) Consecutive Days ----- \$ 30.00

Four (4) to Fourteen (14) Consecutive Days ----- \$ 60.00